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By Jack Copeland

New data from the NCAA Injury Surveillance Program already have influenced safety-related deliberations within the Association during recent weeks, even before the public release this week of a report compiling that information.

Data for five fall sports – the first new information published since the Datalys Center assumed responsibility last year for reporting injury data it collects from NCAA institutions – are now available <u>online</u>.

The data influenced recent discussions by NCAA committees working to improve handling of concussions suffered by student-athletes, largely by serving as a reminder that the injury doesn't occur only in football -- a sport that recently has come under intense governmental and media scrutiny.

"The injury data are useful because they tell us factually that concussions occur across sports," said David Klossner, NCAA director of health and safety and staff liaison to the NCAA Committee on Competitive Safeguards and Medical Aspects of Sports. "Too many people think concussion is just a football injury, but from the NCAA's perspective, it's a condition that is a concern across all the sports."

That concern – informed in part by new injury data from the fall sports of field hockey, football, men's and women's soccer, and women's volleyball – prompted the competitive-safeguards committee's {HYPERLINK

"http://www.ncaa.org/wps/portal/ncaahome?WCM_GLOBAL_CONTEXT=/ncaa/ncaa/ncaa+news/ncaa+news+online/2009/association-

wide/safeguards+committee+acts+on+concussion-management+measures+-+ncaa+news+12-15-09."} of a playing rule for all championship sports that would prohibit student-athletes exhibiting signs of a concussion from returning to play until being cleared by a physician or a designated health-care professional. The NCAA Playing Rules Oversight Panel {HYPERLINK

"http://www.ncaa.org/wps/portal/ncaahome?WCM_GLOBAL_CONTEXT=/ncaa/ncaa/ncaa+news/ncaa+news+online/2010/association-

wide/rules+panel+supports+concussion+concepts"}_last month by instructing each rules committee to thoroughly review policies on stopping play for injuries and to consider instituting rules that may further prevent head injury.

Ultimately, committees writing rules for 23 NCAA sports will be able to review sport-specific injury data as the Datalys Center, a national nonprofit sports-injury research center created in 2008, compiles and releases data later this year for NCAA winter and spring sports.

Among findings, the new injury data indicate:

- Football has the highest injury rate of the five fall sports, with 48 of every 1,000 student-athletes who stepped on a field for a game from 2004-05 to 2008-09 suffering an injury. However, the injury rate in fall-season football practice over those five years is much lower (seven per 1,000 "athlete-exposures").
- Practice injury rates are very similar across all five sports in the study (between seven to eight injuries per 1,000 exposures).
- Nearly 24 of every 1,000 participants in a men's soccer game and 22 of every 1,000 participants in a women's soccer game suffered an injury. The injury rate in field hockey games is approximately 15 per 1,000 and the rate in women's volleyball is nearly nine per 1,000.
- Sprains, strains and contusions are the most frequently occurring injuries in the
 fall sports, but <u>concussion</u> ranks second among the most common injuries in
 football and women's soccer and fourth in men's soccer. It also ranks fourth in
 field hockey and women's volleyball.

Beginning with the just-released fall data, reports are reflecting data collected via an electronic reporting system, as well as enhancements in the ways that injury data are analyzed.

The new fall-sports report depicts sports injuries from a five-year period (2004-05 to 2008-09) across the NCAA membership. It includes the first new NCAA injury data published in five years. The NCAA published previous sports-injury data collected in 15 sports from 1988 through to 2004 in the {HYPERLINK

"http://www.nata.org/jat/readers/archives/42.2/i1062-6050-42-2-toc.pdf"}.

"Those who review (previous data), compared to the new report, should keep certain characteristics in mind," Klossner said. "One is that there could be more injuries included

in the new data sets; and two, there are estimates of total injuries across the Association – something that we did not have in the old system."

Past reports included actual numbers of injuries reported to the NCAA by schools that volunteered to participate in injury surveillance, which then were used to calculate injury rates in each sport. Those reports did not attempt to project total numbers of injuries occurring in each sport.

The new report estimates the cumulative number of injuries that occurred over the fiveyear period, by weighting data to adjust for year-to-year variations in sampling and for possible under-reporting of injuries.

Cumulatively, the Datalys Center estimates there were as many injuries over the five-year period in football (266,943) as in the other four fall sports combined, but that's largely attributable to broader sponsorship of the sport and its large number of participants per team.

"It's important to interpret the data through injury rates rather than whole numbers," Klossner said. The estimated totals, however, are valuable because they "provide the scope of burden on medical care provision across sports and help campuses better anticipate and allocate resources."

The injury rates combining games and practice are 10.9 per 1,000 athlete-exposures in women's soccer, 10.7 in men's soccer, 10.5 in football, 9.2 in field hockey and 7.9 in women's volleyball for every 1,000 exposure opportunities.

An exposure opportunity occurs when one student-athlete participates in a sanctioned practice or game. Practice injuries are collected only during the competitive season, and do not include nontraditional seasons, summer periods, strength-and-conditioning sessions or captain's practices.

Future reports will reflect another important change from past practice. The program now also is collecting and will begin reporting all injuries, regardless of whether time is lost. Previous injury-surveillance reports included only injuries that caused a student-athlete to miss one or more days of practice or competition.

"Going forward, we will collect non-time-loss and time-loss injuries, because we think that gives a better picture of a sport and what the student-athletes are experiencing in a sport," Klossner said. "It allows us to provide policy as well as rules changes that are helpful both in practice and competition."

Another new feature of the report is a competition-to-practice-rate ratio, which indicates the increase in the injury rate in a sport due to participation in a competition, compared to a practice.

Football had the highest competition-to-practice-rate ratio, showing a nearly seven-times greater rate of injury in competition, compared to practice. At the other end of the spectrum of ratios, women's volleyball had essentially the same rate of injury in competitions and practices (1:1 rate ratio).

Klossner encouraged NCAA institutions to participate in the injury-surveillance effort, either by submitting data through an electronic portal provided at no charge by the Datalys Center, or by providing data collected through compatible medical-records data systems already in use on campuses.

"We think that both of these methods open the door to creating a representative sample across all of our sports and institutions," he said.